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CONFIRMATION NO. 4305

<b>SERIAL NUMBER</b> 10/535,530	<b>FILING OR 371(c) DATE</b> 05/18/2005 <b>RULE</b>	<b>CLASS</b> 324	<b>GROUP ART UNIT</b> 2859	<b>ATTORNEY DOCKET NO.</b> PHUS020449US
<b>APPLICANTS</b> Shmaryu M Shvartsman, Highland Hts, OH; Michael A Morich, Mentor, OH; Gordon D DeMeester, Wickliffe, OH;				
<b>** CONTINUING DATA *****</b> L.M.A. This application is a 371 of PCT/IB03/04802 10/29/2003 which claims benefit of 60/427,969 11/20/2002				
<b>** FOREIGN APPLICATIONS *****</b> NONE L.M.A.				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials <i>L.M.A.</i>	<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 27	<b>TOTAL CLAIMS</b> 28 20 <b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 38107				
<b>TITLE</b> Self-shielded gradient field coil for magnetic resonance imaging				
<b>FILING FEE RECEIVED</b> 1500	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	